PATENT APPLICATION FEE DETERMINATION RE Effective December 8, 2004									ORD	Application or Docket Number			
									•	lo	56	4091	
CLAIMS AS FILED - PART I									SMALL ENT	TTY		OTHER	
			(Column	(Column 2)		7 1	TYPE	OR	SMALL ENTITY				
U.S	. NATIONAL S	STAGE FEES							RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 300		= \$ 300		BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$100		All other situations = .\$ 100 / \$ 200				EXAM. FEE			EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$ ALL other cou \$ 200 / \$ 4	All other situations = \$ 250 / \$ 500				SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			minu	/ 50 =				X \$ 125 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			(min	• /				X \$ 25 =		OR	X \$ 50 =		
INDEPENDENT CLAIMS			2_m					X \$ 100 =		OR	X \$ 200 =		
MULTIPLE DEPENDENT CLAIM PRESENT								+ \$ 180 =		OR	+ \$ 360 =	7	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	400	
(Column 1) (Column 2) (Column 3)									SMALL E	OTHER THAN L ENTITY OR SMALL ENTITY			
AMENDMENT A	Tulac	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID		BER PRESENT DUSLY EXTRA			RATE	ADDI- TIQNAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 16	Minus	-20)	-			X \$ 25 =		OR	X \$ 50 =	
AMEN	Independent	• 2	Minus	 3		=			X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+ \$ 180 =		OR	. + \$ 360 =	7
	 				,		(•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER OUSLY	PRE	SENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• .	Minus	**		=			X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	***		•			X \$ 100 =	•	OR	X \$ 200 =	
,	FIRST PRESENTATION OF MULTIPLE DEPENDEN			NDENT (CLAIM				+ \$ 180 =		OR	+ \$ 360 =	
						-		, ,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
									•••		-	•	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".													
***		mber Previously Pai nber Previously Paid						in th	e appropriate box	tin column	1.		